

● PRINTER RUSH ●

(PTO ASSISTANCE)

2nd Request

Application : <u>10/600591</u>	Examiner : <u>Price</u>	GAU : <u>3643</u>
From : <u>PAP</u>	Location : <u>(IDC) FMF FDC</u>	Date : <u>11/28/05</u>

Tracking #: EPM 10/600591 Week Date: 7/11/05

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input type="checkbox"/> CLM	_____	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input checked="" type="checkbox"/> SPEC	<u>6/23/05</u>	

[RUSH] MESSAGE: Page 8, line 26 of the Specification refers to cancelled original claims 18-24. Please advise.

Thank you.

[XRUSH] RESPONSE: _____

CORRECTED AGAIN

INITIALS: [Signature]

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04